

Rasamsonia species isolated from cystis fibrosis patients: MALDI-TOF/MS identification and antifungal susceptibility by EUCAST method

Submitted by claire.leroy on Tue, 05/12/2015 - 14:22

Titre	Rasamsonia species isolated from cystis fibrosis patients: MALDI-TOF/MS identification and antifungal susceptibility by EUCAST method
Type de publication	Communication
Type	Communication sans actes dans un congrès
Année	2014
Langue	Anglais
Date du colloque	05-06/06/2014
Titre du colloque	Third meeting of the ECMM/ISHAM Working group "Fungal respiratory infections in Cystic Fibrosis" (Fri-CF)
Auteur	Jacob, S. [1], Giraud, Sandrine [2], Dannaoui, Eric [3], Leto, Julie [4], Mouhajir, A. [5], Angebault, Cécile [6], Béretti, Jean-Luc [7], Favennec, Loïc [8], Bouchara, Jean-Philippe [9], Bougnoux, Marie-Elisabeth [10]
Pays	France
Ville	Angers

A wide variety of filamentous fungi are able to colonize respiratory tract of patients with cystic fibrosis (CF). Recently, fungi of the genus *Rasamsonia* (formerly *Geosmithia*) have been described as a new emergent group of fungi pathogen in CF patients. The genus *Rasamsonia* comprises nine species including *Rasamsonia argillacea* (*sensu lato*) which is a complex of species (*R. argillacea sensu stricto*, *R. piperina*, *R. eburnea*, and *R. aegroticola*). Only species belonging to species complex *R. argillacea* have been yet isolated from patients with chronic granulomatous disease and CF. Accurate identification at the species level of the members of the *Rasamsonia* complex on the basis of morphology criteria is challenging, and frequent misidentification with a *Penicillium emersonii* have been reported.

Résumé en
anglais

Matrix-assisted laser desorption ionization (MALDI)-time of flight (TOF)/mass spectrometry (MS) is a powerful tool to rapidly identify moulds at the species level. We investigated the potential of this technology to discriminate *Rasamsonia* species. Nine reference strains were used to build a reference database library. Profiles from 3-, 5- and 7-day-old cultures of each reference strain were analysed to identify species-specific discriminating profiles. The database was tested for accuracy using a set of 74 clinical isolates collected from 29 CF-patients in 4 French hospitals (Rouen, Giens, Angers and Paris). For each isolate, the species identification obtained using MALDI-TOF/MS was compared to this obtained by Diversilab method. Our results showed a high reliability of the MALDI-TOF analysis. Antifungal susceptibility testing was also performed for 20 isolates (identified as *R. argillacea*, *R. aegroticola* or *R. piperina*) from 13 patients using the microdilution broth reference method of the Antifungal Susceptibility Testing Subcommittee of EUCAST. All isolates tested showed a high MIC of > 8 mg/L to voriconazole, and the majority also showed high MICs to itraconazole (MIC > 8 mg/L), except for *R. piperina* strains (MIC 0.5 - 1 mg/L). The susceptibility to amphotericin B was variable (MIC: 0.5 - > 8 mg/L), with no specific distinction according to *Rasamsonia* species. Finally, all isolates exhibited low MICs to micafungin (0.0312 - 0.125 mg/L). Altogether, our results show that MALDI-TOF/MS is a powerful tool for rapid identification of *Rasamsonia* species that cannot be currently identified by morphological examination in the clinical setting, and confirm that the members of *R. argillacea* complex, colonizing respiratory tract in CF patients, have a very low susceptibility to available antifungal agents.

URL de la
notice

<http://okina.univ-angers.fr/publications/ua11245> [11]

Lien vers le
document en
ligne

<http://www.isham.org/WorkingGroups/CysticFibrosis/> [12]

Liens

- [1] [http://okina.univ-angers.fr/publications?f\[author\]=19949](http://okina.univ-angers.fr/publications?f[author]=19949)
- [2] <http://okina.univ-angers.fr/sandrine.giraud/publications>
- [3] [http://okina.univ-angers.fr/publications?f\[author\]=7967](http://okina.univ-angers.fr/publications?f[author]=7967)
- [4] [http://okina.univ-angers.fr/publications?f\[author\]=15256](http://okina.univ-angers.fr/publications?f[author]=15256)
- [5] [http://okina.univ-angers.fr/publications?f\[author\]=19948](http://okina.univ-angers.fr/publications?f[author]=19948)
- [6] [http://okina.univ-angers.fr/publications?f\[author\]=19969](http://okina.univ-angers.fr/publications?f[author]=19969)
- [7] [http://okina.univ-angers.fr/publications?f\[author\]=19970](http://okina.univ-angers.fr/publications?f[author]=19970)
- [8] [http://okina.univ-angers.fr/publications?f\[author\]=7836](http://okina.univ-angers.fr/publications?f[author]=7836)
- [9] <http://okina.univ-angers.fr/j.bouchara/publications>
- [10] [http://okina.univ-angers.fr/publications?f\[author\]=15240](http://okina.univ-angers.fr/publications?f[author]=15240)
- [11] <http://okina.univ-angers.fr/publications/ua11245>
- [12] <http://www.isham.org/WorkingGroups/CysticFibrosis/>

